

# NEWS FROM MRMIB

The **M**anaged **R**isk **M**edical **I**nsurance **B**oard

February 19, 2013

For Immediate Release

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## **New Enrollment for Pre-Existing Condition Insurance Plan to Close**

*Program Continues Those With Pre-Existing Conditions Through 2014*

As the insurance program serving Americans with pre-existing medical conditions completes its final year of operation, the federal government has notified all Pre-Existing Condition Insurance Plans (PCIPs) in the 50 states and District of Columbia to close new enrollments for applications received after March 2, 2013.

PCIP was one of the first major provisions of the Affordable Care Act (ACA) to take effect after the landmark legislation was enacted on March 23, 2010, and was designed to serve as a bridge until 2014, when additional ACA provisions become effective that prevent insurance companies from charging more or denying coverage to persons with pre-existing conditions.

“PCIP has been helping Californians who had nowhere else to go,” said Cliff Allenby, MRMIB Chairman. “California is working hard to implement the ACA so individuals with pre-existing conditions cannot be denied affordable coverage.”

Managed Risk Medical Insurance Board (MRMIB) Executive Director Janette Casillas will present details of the nationwide PCIP enrollment suspension and its effect on California’s PCIP to the Board at its February 20, 2013 meeting.

MRMIB has operated California’s PCIP since October 25, 2010, as a contractor for the federal government, enrolling more than 21,000 Californians who had been without health coverage for at least six months. California’s PCIP currently has more than 16,000 subscribers.

The federal notification came on February 15, when the Centers for Medicare and Medicaid Services (CMS) moved to close PCIP enrollment for the states in which it operates the program. In making the nationwide notification, CMS said the suspension of new enrollment was designed to help manage the funds remaining from the original \$5 billion federal appropriation to the program so that persons already enrolled in the program could continue to be served.

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The CMS notification requested that states determine the feasibility of changing their PCIP benefits structure to align subscriber cost-sharing with the federal structure effective April 1, 2013, or as soon thereafter as possible. A full listing of benefit differences between the federal and California programs will be provided to the Board at its February 20 meeting.

MRMIB is an independent board within the California Health and Human Services Agency that also operates the Healthy Families, Access for Infants and Mothers, and Major Risk Medical Insurance programs.

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